## **Alternate Care Operating Budget**

PROVIDER:	Year:	2011
Parent Corp.:	Data Bv:	

Hirdd Meal Staff	Cost Category	Sub-Category	Total Facility Costs	Less: Personal Usage Share	Net for Resident Care	Room & Board	Care & Service
Hired Meal Staff	Staff Wages	Owner/Operator Draws		J	0		0
HireO Meal Staff		Hired Service Staff			0		0
Comeri/Operator   0		Hired Meal Staff			0	0	
Fringe Benefits		Hired Maintenance Staff			0	0	
Firing to Hirsed Meal Staff		Owner/Operator			0		0
Interest New Staff	Frience Demotite	Hired Service Staff			0		0
Employee Travel   Company Owned Vehicles   0   0   0   0   0   0   0   0   0	Fringe Benefits	Hired Meal Staff			0	0	
Employee Travel   Company Owned Vehicles   0   0   0   0   0   0   0   0   0		Hired Maintenance Staff			0	0	
Mileage Reimbursement   0					0		0
Staff Recruitment, Advertising, etc.	Employee Travel				0		0
Staff Training & Education	Staff Recruitment, Adve						
Household   Programming   Department   Dep							
Programming						0	, and the second
Food & Meal Costs	Supplies					,	0
Advertising (other than for Staff Recruitment)	Food & Meal Costs	į, rogiaminig				0	<u> </u>
Telephone   Staff/Owner(s)   Resident Use   0   0   0   0		or Staff Recruitment)				3	n
Resident Use							
Insurance	Telephone	( )				0	
Liability Insurance							
Utilities (Electric, Gas, Water, Sewer)	Insurance					U	0
Building   Equipment (Resident Use)   Company   Compan	Litilities (Flectric Gas M					0	U
Equipment (Resident Use)	Othlites (Electric, Gas, v						
Equipment (Owner/Staff)   0   0   0   0   0   0   0   0   0							
Vehicle Maintenance	Maintence/Repairs					U	0
Building							
Equipment (Resident Use)						0	U
Equipment (Owner/Staff)   0   0   0   0   0   0   0   0   0	Pontolo						
Depreciation   Building & Land Improve   Equipment (Resident Use)   0   0   0   0   0   0   0   0   0	Remais					U	0
Equipment (Resident Use)   0   0   0						0	U
Equipment (Owner/Staff)   0		Equipment (Pecident Use)					
Vehicles	Depreciation					U	0
Mortage Interest							
Equipment (Resident Use)						0	U
Equipment (Owner/Staff)   0		Mortage Interest					
Vehicles	Interest					U	2
Non-Depreciated Equipment							
Equipment         Owner/Staff Use         0         0           Professional Fees (accounting, etc.)         0         0         0           Licenses & Fees (i.e. CBRF license)         0         0         0           Taxes         Property Taxes         0         0         0           Cable Television         0         0         0         0           Resident Activities         0         0         0         0           Outside Transportation Vendors         0         0         0         0           Other Allowable Room & Board Costs         0         0         0         0           Other Allowable Care & Service Costs         0         0         0         0         0           Administrative Charge         Apply to Room & Board Apply to Care & Service         0         0         0         0           Profit/Loss         Apply to Room & Board Apply to Care & Service         0         0         0         0							0
Professional Fees (accounting, etc.)	-					0	2
Licenses & Fees (i.e. CBRF license)         0         0           Taxes         Property Taxes         0         0           Employer Taxes         0         0           Cable Television         0         0           Resident Activities         0         0           Outside Transportation Vendors         0         0           Other Allowable Room & Board Costs         0         0           Other Allowable Care & Service Costs         0         0           TOTAL DIRECT COSTS         0         0         0           Administrative Charge         Apply to Room & Board Apply to Care & Service         0         0           Profit/Loss         Apply to Care & Service         0         0							
Property Taxes							
Employer Taxes	Licenses & Fees (i.e. CE	,					0
Cable Television         0         0           Resident Activities         0         0           Outside Transportation Vendors         0         0           Other Allowable Room & Board Costs         0         0           Other Allowable Care & Service Costs         0         0           TOTAL DIRECT COSTS         0         0         0           Administrative Charge         Apply to Room & Board Apply to Care & Service         0         0           Profit/Loss         Apply to Room & Board Apply to Care & Service         0         0	Taxes					0	0
Resident Activities         0         0           Outside Transportation Vendors         0         0           Other Allowable Room & Board Costs         0         0           Other Allowable Care & Service Costs         0         0           TOTAL DIRECT COSTS         0         0         0           Administrative Charge         Apply to Room & Board Apply to Care & Service         0         0           Profit/Loss         Apply to Room & Board Apply to Care & Service         0         0						0	
Outside Transportation Vendors         0         0           Other Allowable Room & Board Costs         0         0           Other Allowable Care & Service Costs         0         0           TOTAL DIRECT COSTS         0         0         0           Administrative Charge         Apply to Room & Board Apply to Care & Service         0         0           Profit/Loss         Apply to Room & Board Apply to Care & Service         0         0					0		0
Other Allowable Room & Board Costs         0         0           Other Allowable Care & Service Costs         0         0           TOTAL DIRECT COSTS         0         0         0           Administrative Charge         Apply to Room & Board Apply to Care & Service         0         0           Profit/Loss         Apply to Room & Board Apply to Care & Service         0         0							
Other Allowable Care & Service Costs         0         0           TOTAL DIRECT COSTS         0         0         0         0           Administrative Charge         Apply to Room & Board Apply to Care & Service         0         0           Profit/Loss         Apply to Room & Board Apply to Care & Service         0         0						0	, i
TOTAL DIRECT COSTS   0   0   0   0   0							0
Administrative Charge			0	0		0	
Apply to Care & Service   0	Administrative Charge		, ,		J		<u> </u>
Apply to Room & Board   0						3	n
Apply to Care & Service 0	Profit/Loss	1 1 1 2				0	- i
						3	n
	TOTAL DIRECT				0	0	

	Provider Type (Circle One):	Adult Family Home	C.B.R.F.	R.C.A.C.	Supervised Apartment	Other
Current Residents	:		Total Annual Costs from Above		0	0
Licensed Capacity	 :		Planned Number of Residents		0.00	0.00
Planned Residents			Annual Planned C	Costs per Resident	#DIV/0!	#DIV/0!
Staff in Home	:		Monthly Planned (	Costs per Resident	#DIV/0!	#DIV/0!
Family in Home	:		Daily Planned Co	osts per Resident	#DIV/0!	#DIV/0!